lidurtia: 9/26 Intro: 10/5 P.H: 10/12@3pm

INTER-DEPARTMENT COMMUNICATION

TO: Joan Ross

DATE:

September 11, 2009

DEPARTMENT: City Clerk's Office

FROM:

Bruce D. Dart, PhD

Health Director

ATTENTION:

DEPARTMENT:

Lincoln-Lancaster County Health

Department

CARBONS TO:

Scott E. Holmes

SUBJECT:

Nuisance Abatement Assessments

Marcia Huenink

In accordance with Lincoln Municipal Code 8.26.040 - Report to Council; Assessment of Cost; Collection of Assessment, I am forwarding the attached information for the City Council's action. The information attached provides:

- > all real estate cleared of a public nuisance since September 1, 2008;
- > all costs associated with clearing each property of public nuisances:
- > the address, Parcel ID number, and legal description of the property cleared of the public
- > the property owner of record and the property owner's last known address from the Lancaster County Assessor's Property Information Search database

Please schedule the public hearing before the City Council for these assessments.

If you have any questions, please contact Marcia Huenink at 441-8634.

Mlh:07 Memo City Clerk

2008-2009 Property Information

Address	Legal Description	Owner Name/Mailing Address	Parcel ID
2518 "P" Street	Kinney's O St Add, Block 19, Lot 8, E17' & Lot 9 W16'	Nam Van Dang & Phuc Thi Nguyen 1933 Patterson Court Lincoln, NE 68522	10-24-433-010-000
1416 North 21 st Street	Kimmel & Van Duyns Sub, Lot 5	Elizabeth Peterson 412 West Lakeshore Drive Lincoln, NE 68528	10-24-200-005-000
2335 South 39 th Street	Woods Bros Half Acres, Lot 106, S61.89'	Donald Lopez 2335 South 39 th Street Lincoln, NE 68506	17-31-415-015-000
1416 North 21st Street	Kimmel & Van Duyns Sub, Lot 5	Elizabeth Peterson 412 West Lakeshore Drive Lincoln, NE 68528	10-24-200-005-000
835 Peach Street	South Lincoln, Block 9, Lot 3	Donald Tubbs 47 Herrn Lance Castle Rock, CO 80108	10-35-236-004-000
837 South Street	South Park Add, Block 3, Lot 2, W40' & Lot 3 E10'	ANLA Houses, LLC 2701 West High Ridge Circle Lincoln, NE 68522	10-35-402-003-000
2910 "T" Street	Pitcher & Baldwins Sub, Block 3, Lot 8	Timothy Donner 4420 Kirkwood Drive Lincoln, NE 68516	17-19-347-009-000
3090 "T" Street	Pecks Grove SE NW & NE SW 19-10-7, Block 16, Lot 15, W45'	Melissa Cummings 3090 "T" Street Lincoln, NE 68503	17-19-306-017-000
1334 North 20 th Street	Montgomerys Add, Lot 7	Jeffrey & Shirley Downing 12000 Southwest 128 th Street Denton, NE 68339	10-24-107-007-000
844 Peach Street	South Lincoln, Block 10, Lot 11	Roger Moats 844 Peach Street Lincoln, NE 68502	10-35-229-011-000
4901 Normal Blvd	Normal Park Sub, Block 1, Lot 5	Castle Ventures, Inc P O Box 6391 Lincoln, NE 68506	17-32-432-005-000
		ALSO	
		KNB, LLC P O Box 6391 Lincoln, NE 68506	
1411 North 24 th Street	Engleside Add, Block 1, Lot 5	Jarrod Stinnett 1411 North 24 th Street Lincoln, NE 68503	10-24-203-019-000

1425 North 24 th Street	Engleside Add, Block 1, Lot 4, S33'	Connie Kometscher 1425 North 24 th Street Lincoln, NE 68503	10-24-203-020-000
2744 Starr Street	East Park Add, Block 2, Lot 21, E1/2 & Lot 22	Harry Younghans P O box 6 Sprague, NE 68438	17-19-100-018-000
913 Rose Street	South Lincoln, Block 19, Lot 5	Larry Barkdoll P O Box 22354 Lincoln, NE 68502	10-35-230-006-000
5118 Knox Street	University Place, Block 11, Lot 9	Frank Overton 6935 Colfax Avenue Lincoln, NE 68507	17-08-425-008-000
1434 North 27 th Street	East Park Add, Block 2, Lot 12, Ex 312 Sq Ft on N & Lot 13 S92.6' Ex St & Lot 14 S92.6' Ex St	Huong Nguyen & Thu Van Van 1823 South Tara Falls Wichita, KS 67207	17-19-100-011-000
2026 Lake Street	Randall Place, Block 2, Lot 16	Wanda Simmons 2724 South 14 th Street Lincoln, NE 68502	10-36-412-016-000
1944 "L" Street	Boggs and Holmes Sub, Lot 21, W50' E100'	Wilbur Scholle 1944 "L" Street Lincoln, NE 68510	10-25-118-019-000
1645 Washington	Chases Sub, Block 2, Lot 2	Stone Wood Properties, LLCH 3220 Pacific Street Omaha, NE 68105	10-36-108-003-000
405 South 26th Street	Youngs East Lincoln, Block 8, Lot 11	Pages LLC 1941 "K" Street Lincoln, NE 68510	10-25-207-011-000
417 South 26 th Street	Youngs East Lincoln, Block 8, Lot 12	Jason Escamilla 417 South 26 th Street Lincoln, NE 68510	10-25-207-012-000
1629 Prospect	Burrs (C C) Subdivision, Block 8, Lot 5	Brian Patrick Ford 1629 Prospect Street Lincoln, NE 68502	10-36-120-004-000
4321 Greenwood	Imhoffs Addition to University Place, Block 37, Lot 4 & E10' Lot 5	Brent Magnuson 1145 West Avon Lane Lincoln, NE 68505	17-08-326-003-000
6501 Franklin	Park Manor Sub, Block 14, Lot 1	Danny Joel Struble & Julia Elke 6501 Franklin Street Lincoln, NE 68506	17-33-123-001-000
425 North 28 th Street	Houtz & Baldwins Sub (Of W1/2 NW SW 19-10-7), Block 6, Lot 2, S1/2	Anthony Kemna 2435 "C" Street Lincoln, NE 68503	17-19-314-011-000
1425 North 24 th Street	Engleside Add, Block 1, Lot 4, S33'	Connie Kometscher 1425 North 24 th Street Lincoln, NE 68503	10-24-203-020-000
4011 North 60 th Street	Havelock, Block 77, Lot 5	Vannessa Wright & David Gill 4011 North 60 th Street Lincoln, NE 68508	17-09-124-008-000

3203 Orchard Street	Braces Subdivision, Lot 12	Southpaw Investments, LLC 3820 South 42 nd Street Lincoln, NE 68506	17-19-117-011-000
1645 Washington	Chases Sub, Block 2, Lot 2	Stone Wood Properties, LLCH 3220 Pacific Street Omaha, NE 68105	10-36-108-003-000
1130 North 29 th Street	East Park Second Addition, Block 9, Lot 11	Federal National Mortgage Association 1 S Wacker Drive, Suite 1400 Chicago, IL 60606	17-19-114-002-000
1200 South 16 th Street	Lincoln Original, Block 214, Lot 6, N 61.5'	Southpaw Investments, LLC 3820 South 42 nd Street Lincoln, NE 68506	10-25-325-007-000
2400 "N" Street	Youngs East Lincoln, Block 3, Lot 9-11	Jerryco Investment 3235 South 39 th Street Lincoln, NE 68506	10-25-201-010-000
1834 Prospect Street	Prospect Sub, Lot 11	Lee & Carl Simmons 2724 South 14 th Street Lincoln, NE 68502	10-36-140-002-000
2024 South 18 th Street	Harwoods Add, Block 3, Lot 15	LaSalle Bank NA Trustee 14523 Southwest Millikan Way, Suite 200 Beaverton, OR 97005	10-36-130-004-000
540 North 28 th Street	Houtz & Baldwins Sub (Of W1/2 SW 19- 10-7), Block 4, Lot 5	Chi Van Do & Thi Pham Loan 8150 South 58 th Street Lincoln, NE 68516	17-19-310-005-000
11-18-419-012-000	Hub Hall Heights 1 st Addition, Square Feet	ASSESSMENT PAID WAIVED PUBLIC HEARING	11-18-419-012-000
309 South 25 th Street	Brookline Addition, Block 4, Lot 2	William & Linda Jeffery 740 South 48 th Street Lincoln, NE 68510	10-25-210-013-000
1105 North 25 th Street	East Park Second Addition, Block 4, Lot 6, E76'	Lloyd & Kim Brown 1105 North 25 th Street Lincoln, NE 68503	10-24-215-009-000
6935 Colfax Avenue	Woods Bros Second Add to Havelock, Block 19, Lot 3-4	Franklin & Julie Overton 6935 Colfax Avenue Lincoln, NE 68507	17-09-248-019-000
336 North 32 nd Street	Dyers Sub, Lot 8	Cress Family Trust 901 Maple Drive Eagle, NE 68347	17-19-341-008-000
830 North 25 th Street	Easterday Bros Replat (Of Lots 1-12 Easterday Addition), Lot H	Edwin & Jeanene Davis 513 E Liberty Drive Wheaton, IL 60187	10-24-236-009-000
2525 Cleveland	Carroll M5 Addition, Lot 2 & Outlot A	Ceejay, LLC 10540 Marty Street, Suite 110 Overland Park, KS 66212	11-13-205-002-000
826 South 31st Street	Park View Add, Block 1, Lot 17	Todd Wagner 826 South 31 st Street Lincoln, NE 68510	17-30-304-004-000

540 North 48 th Street	Houtz & Baldwins Sub (Of W1/2 SW 19- 10-7), Block 4, Lot 5	Chi Van Do & Thi Pham Loan 8150 South 58 th Street Lincoln, NE 68516	17-19-310-005-000
2327 "D" Street	Hillsdale, Block 1, Lot 3	Lelia Razey P O Box 126 Greenwood, NE 68366	10-25-422-004-000
6927 Aylesworth	Bethany Heights, Block 52, Lot 4 & E10' Lot 5	Douglas & Lori Bishop 6927 Aylesworth Avenue Lincoln, NE 68505	17-16-438-004-000
344 North 27 th Street	Sunnyside Add, Block 4, Lot 15, Ex W1.5'	Kimchi Thi Dang 244 North 27 th Street Lincoln, NE 68503	17-19-319-007-000

EXHIBIT A

Nuisance Abatement Costs Report from the Lincoln-Lancaster County Health Department

Clearance Number	Address	Clearance Date	Inspection Costs	Supervisory Review Costs	Admin Costs for Clearance Order	Admin Costs for Arraignment Rept	Abatement Costs	Total Costs Assigned to Property Owner
08-34	2518 P Street	9-24-08	87.00	9.50	57.25		50.00	203.75
08-35	1416 North 21st Street	10-10-08	34.80	9.50	57.25		84.00	188.55
08-37	2335 South 39 th Street)	10-29-08	69.60	9.50	57.25		35.00	171.35
08-38	1416 North 21st Street	11-19-08	52.20	9.50	57.25		100.00	218.95
08-39	835 Peach Street	11-25-08	52.20	9.50	57.25		100.00	218.95
08-41	837 South Street	12-11-08	52.20	9.50	57.25		110.00	228.95
09-01	2910 "T" Street	1-7-09	52.20	9.50	57.25		60.00	178.95
09-02	3090 "T" Street	1-7-09	34.80	9.50	57.25		65.00	166.55
09-03	1334 North 20 th Street	1-7-09	69.60	9.50	57.25		60.00	196.35
09-04	844 Peach Street	1-7-09	52.20	9.50	57.25		100.00	218.95
09-05	4901 Normal Boulevard	1-9-09	69.60	9.50	57.25		30.00	166.35
09-06	1411 North 24 th Street	1-13-09	52.20	9.50	57.25		65.00	183.95
09-07	1425 North 24 th Street	1-13-09	104.40	19.00	57.25		95.00	275.65
09-08	2744 Starr Street	2-4-09	69.60	9.50	57.25		60.00	196.35
09-09	913 Rose Street	2-5-09	87.00	9.50	57.25		30.00	183.75
09-10	5118 Knox Street	2-11-09	52.20	9.50	57.25		50.00	168.95
09-11	1434 North 27 th Street	2-11-09	52.20	9.50	57.25		50.00	168.95
09-12	2026 Lake Street	2-12-09	104,40	19.00	57.25		40.00	220.65
09-13	1944 "L" Street	3-13-09	34.80	9.50	57.25		75.00	176.55
09-14	1645 Washington	3-18-09	52.20	9.50	57.25		85.00	203.95
09-15	405 South 26th Street	3-18-09	69.60	9.50	57.25		65.00	201.35

216.55	115.00	57.25	9.50	34.80	8-6-09	2327 "D" Street	09-43
188.95	70.00	57.25	8.50	52.20	8-5-09	540 North 28th Street	09-42
188.75	35.00	57.25	9.50	87.00	7-16-09	826 South 31st Street	09-40
218.95	100.00	57.25	9.50	52.20	7-15-09	2525 Cleveland Avenue	09-38
318.95	200.00	57.25	9.50	52.20	7-15-09	830 North 25 th Street	09-37
158.95	40.00	57.25	9.50	52.20	7-10-09	336 North 32 nd Street	09-35
141.55	40.00	57.25	9.50	34.80	7-2-09	6935 Colfax Avenue	09-34
338.95	220.00	57.25	9.50	52,20	6-19-09	1105 North 25 th Street	09-33
198.95	80.00	57.25	9.50	52,20	6-18-09	309 South 25 th Street	09-32
					6-11-09	PID 11-18-419-012-000*	09-31
178.95	60.00	57.25	9.50	52.20	6-2-09	540 North 28 th Street	09-30
196.35	60.00	57.25	9.50	69.60	5-27-09	2024 South 18 th Street	09-29
228.75	75.00	57.25	9.50	57.00	5-8-09	1834 Prospect	09-28
361.35	225.00	57.25	9.50	69.60	4-29-09	2400 "N" Street	09-27
158.95	40.00	57.25	9.50	52.20	4-23-09	1200 South 16th Street	09-26
223.95	105.00	57.25	9.50	52.20	4-22-09	1130 North 29 th Street	09-25
188.95	70.0	57.25	9.50	52.20	4-10-09	1645 Washington Street	09-24
181.35	45.00	57.25	9.50	69.60	4-7-09	3203 Orchard Street	09-23
188.75	35.00	57.25	9.50	87.00	4-7-09	4011 North 60th Street	09-22
273.05	75.00	57.25	19.00	121.80	4-3-09	1425 North 24th Street	09-21
201.55	100.00	57.25	9.50	34.80	4-3-09	425 North 28 th Street	09-20
211.35	75.00	57.25	9.50	69.60	3-25-09	6501 Franklin Street	09-19
208.95	90.00	57.25	9.50	52.20	3-25-09	4321 Greenwood Street	09-18
168.95	50.00	57.25	9.50	52.20	3-19-09	1629 Prospect Street	09-17
206.35	/0.00	57.25	9.50	69.60	3-18-09	417 South 26 th Street	09-16

298.95	180.00	57.25	9.50	52.20	8-13-09	344 North 27 th Street	09-45
153.95	35.00	57.25	9.50	52.20	8-13-09	6927 Aylesworth	09-44

^{*}The assessment costs for this property has been paid. The property owner has waived their right to a public hearing.



Authorizatio	n Numbei
Location of P	remises
Legal Descrip	otion

<u> 08-34</u>					
2518 P	57				
Kinneus	O St. Add.	Block 19.	Lot B.	E17' &	LOT9 W16

I, as Health Director, have found that:
The owner (or his/her authorized agent) of the premises stated above has failed to comply with a five (5) day nuisance abatement notice served in person or via certified mail on 9/8/2008. The tenant or occupant of said premises has failed to comply with a five (5) day nuisance abatement notice served in person or via certified mail on/
Therefore, by virtue of the authority vested in me by Lincoln Municipal Code Chapter 8.26.030, I hereby authorize a refuse hauler to remove the offensive substances constituting a declared public nuisance existing on the premises stated above.
Health Director Date
By the authority granted in Nuisance Abatement Authorization No. <u>08-34</u> issued on <u>9 / 23/08</u> by the Director of the Lincoln-Lancaster County Health Department, and for a fee of \$ 50 0 to be paid by the Department, representatives of the region Sent at on Tire, cleared the premises at <u>2518 P 3+</u>
of the conditions constituting a public nuisance on 9/24/08. Licensed Refuse Hauler Cracon Sonitation Inc.
Name of Hauler Representative (print) Signature FUEL HATTEN
Health Department Representative Signature
STATE OF NEBRASKA))ss.
County of Lancaster)
Before me, a notary public qualified for said County, personally came \(\frac{1}{2} \) \(\frac{1}{2} \) \(\frac{1}{2} \) \(\frac{1}{2} \), known to me to be the identical persons who signed the foregoing Nuisance Abatement Authorization, and acknowledged the execution thereof to be a voluntary act and deed.
WITNESS MY HAND AND NOTORIAL SEAL THIS 3 DAY OF LORNING , 2008
GENERAL NOTARY - State of Nebraska RONI R. OLANDER My Comm. Exp. Aug. 30, 2009 NOTARY PUBLIC
Assessment Costs: \$ 203.75 (These costs are approximate and are subject to change.) This form shall

White - Health Department

serve as notification of a pending assessment against the property.

Pink - City Clerk



Authorization Number Location of Premises Legal Description

serve as notification of a pending assessment against the property.

White - Health Department

Yellow - Refuse Hauler

10-24-200-605-000
as Health Director, have found that:
 ✓ The owner (or his/her authorized agent) of the premises stated above has failed to comply with a five (5) day nuisance abatement notice served in person or via certified mail on 10/3/2008. ☐ The tenant or occupant of said premises has failed to comply with a five (5) day nuisance abatement notice served in person or via certified mail on//
herefore, by virtue of the authority vested in me by Lincoln Municipal Code Chapter 8.26.030, I hereby authorize a efuse hauler to remove the offensive substances constituting a declared public nuisance existing on the premises tated above.
Health Director Date Agricult Heatth Lineator
y the authority granted in Nuisance Abatement Authorization No. 08-35 issued on 10 1/0 08 by the birector of the Lincoln-Lancaster County Health Department, and for a fee of \$ 84.00 to be paid by the Department, representatives of Paragon Santation cleared the premises at 1416 M2155T. It to conditions constituting a public nuisance on 10 10 108. It icensed Refuse Hauler PARAGON SANITATION, INC. It is a superior of the Lincoln-Lancaster County Health Department Representative (print) Signature Representative Signature Richard Slama Signature
TATE OF NEBRASKA))ss. County of Lancaster)
Before me, a notary public qualified for said County, personally came, known to be the identical persons who signed the foregoing Nuisance Abatement Authorization, and acknowledged the xecution thereof to be a voluntary act and deed.
WITNESS MY HAND AND NOTORIAL SEAL THIS DAY OF WHOLE , DOWN
GENERAL NOTARY - State of Nebraska RONI R. OLANDER My Comm. Exp. Aug. 30, 2009 NOTARY PUBLIC
Assessment Costs: \$ 185,55 (These costs are approximate and are subject to change.) This form shall

Pink - City Clerk



Autho	rizati	on N	lumbe	er
Locati	ion of	f Pre	mises	
Legal	Desci	riptio)n	

horization Number ation of Premises	2335539th Lincoln Na	
al Description	Woods Bros Half Acres, Lot 106, Sb1.89'	

, as Health Director, have fo	und that:	
(5) day nuisance abater	nent notice served of said premises h	of the premises stated above has failed to comply with a five lin person or via certified mail on 10 / 15 / 08. The premises stated above has failed to comply with a five (5) day nuisance abatement notice/
Therefore, by virtue of the a refuse hauler to remove the stated above.	uthority vested in a offensive substanc	me by Lincoln Municipal Code Chapter 8.26.030, I hereby authorize a ces constituting a declared public nuisance existing on the premises
	Health Director	<u>10 121 101</u> Date
Director of the Lincoln-Lanca Department, representatives	aster County Healt of <u>Factagos</u>	ent Authorization No. $\bigcirc 8-37$ issued on $10/28/08$ by the h Department, and for a fee of \$\frac{35}{35}\$ to be paid by the $\bigcirc 10/28/08$ cleared the premises at $\boxed{2335}$ $\boxed{39}$ $\boxed{39}$
of the conditions constituting	- marina	
Licensed Refuse Hauler	Paragon	Santart un
Name of Hauler Represer	<i>f</i>	Scott Zujeck fort
Health Department Repr	esentative Signature	James & BARE REHS James & Box- REHS
STATE OF NEBRASKA)	
County of Lancaster)ss.)	and the second s
Before me, a notary me to be the identical perso execution thereof to be a vo	ns who signed the	or said County, personally came, known to e foregoing Nuisance Abatement Authorization, and acknowledged the eed.
WITNESS MY HAND	-	21/10 10/10
A GI	NERAL NOTARY - State of Ne RONI R. OLANDE My Comm. Exp. Aug. 30,	B The test of the state of the



Authorization Number Location of Premises	08-38 1416 North 215	Street	
Legal Description	Kimmel & Van D	uyns Sub, Lots	
I, as Health Director, have found	that:		ı
(5) day nuisance abatement The tenant or occupant of s	notice served in person or via	tated above has failed to comply certified mail on 11/3/3/caply with a five (5) day nuisance	<u> </u>
Therefore, by virtue of the authorefuse hauler to remove the offestated above.			
He	alth Director	1)	
By the authority granted in Nuis Director of the Lincoln-Lancaster Department, representatives of of the conditions constituting a Licensed Refuse Hauler	County Health Department, an	and for a fee of $\frac{160.00}{14}$ to be cleared the premises at $\frac{14}{168}$.	e paid by the
Name of Hauler Representat	C 1	HATTEN Hatten	
Health Department Represer	otative Harry Signature Harry	alkala Kl. 115 A. Has Es	11-19-33
STATE OF NEBRASKA			,
County of Lancaster	ss.		
Before me, a notary pub me to be the identical persons v execution thereof to be a volunt	lic qualified for said County, p tho signed the foregoing Nuisa ary act and deed.	ersonally came <u> </u>	known to and acknowledged the
WITNESS MY HAND AND	NOTORIAL SEAL THIS 1	DAY OF NOTALL DOWN	<u> </u>
RON	RY - State of Nebraska R. OLANDER 1. Exp. Aug. 30, 2009	NOTARY PU	Jandez

Assessment Costs: \$ 218.95 (These costs are approximate and are subject to change.) This form shall serve as notification of a pending assessment against the property.



Authorization Number Location of Premises	_08-39		5 Peach Stra	n 4	
Legal Description	50uth	Lincoln, E	5 Peach Street		
I, as Health Director, have four The owner (or his/her aut (5) day nuisance abateme The tenant or occupant o served in person or via ce	nd that: horized agent) of ent notice served f said premises h	f the premises stat in person or via co as failed to compl	ed above has failed to	comply with a fiv	
Therefore, by virtue of the autirefuse hauler to remove the of stated above.					
- }	Health Director	L	// /_)/// Date	<u>×</u>	
By the authority granted in Nu Director of the Lincoln-Lancast Department, representatives o of the conditions constituting Licensed Refuse Hauler	ter County Health of <u>farmers</u> a public nuisance	Department, and	for a fee of \$ <u>【りりい</u> leared the premises at	$\stackrel{\text{\tiny Lag}}{=}$ to be paid by 1	the
Name of Hauler Represent	ative (print) Signature	Cort	Stofford		
Health Department Repres	entative Signature	Harry A.	Heater ATH		
STATE OF NEBRASKA County of Lancaster))ss.)				
Before me, a notary prome to be the identical persons execution thereof to be a volu	who signed the	foregoing Nuisan		zation, and acknow	_, known to wledged the
WITNESS MY HAND A	nd notorial se	AL THIS <u>QU</u>	_ DAY OF WOUNT	ber	-, 2008
	AL NOTARY - State of Nebras RONI R: OLANDER		Rut	TARY PURIC	· · · · · · · · · · · · · · · · · · ·

Assessment Costs: \$ 218.95 (These costs are approximate and are subject to change.) This form shall serve as notification of a pending assessment against the property.



Autho	rizatio	on N	umbei
Locati	on of	Prei	nises
Legal	Descr	iptic	n

837 South Street
South Park Add, Birck 3, Lot 2, W40' & Lot 3 E10'

I, as Health Director, have found that:
 ☑ The owner (or his/her authorized agent) of the premises stated above has failed to comply with a five (5) day nuisance abatement notice served in person or via certified mail on 11 / 2 / ○ ○ ○. ☑ The tenant or occupant of said premises has failed to comply with a five (5) day nuisance abatement notice served in person or via certified mail on/
Therefore, by virtue of the authority vested in me by Lincoln Municipal Code Chapter 8.26.030, I hereby authorize a refuse hauler to remove the offensive substances constituting a declared public nuisance existing on the premises stated above.
Health Director Date
By the authority granted in Nuisance Abatement Authorization No. <u>O8-41</u> issued on <u>12 / 8 / 08</u> by the Director of the Lincoln-Lancaster County Health Department, and for a fee of \$ // 02 to be paid by the Department, representatives of cleared the premises at \$ 37 \$ \$ 54 \$ of the conditions constituting a public nuisance on <u>12 / 11 / 08</u> .
Licensed Refuse Hauler Parigan Santation
Name of Hauler Representative (print) Signature
Health Department Representative Signature Hosey House Representative Agency House Representative Representati
STATE OF NEBRASKA))ss. County of Lancaster)
Before me, a notary public qualified for said County, personally came, known to me to be the identical persons who signed the foregoing Nuisance Abatement Authorization, and acknowledged the execution thereof to be a voluntary act and deed. WITNESS MY HAND AND NOTORIAL SEAL THIS DAY OF
GENERAL NOTARY - State of Nebraska RONI R. OLANDER My Comm. Exp. Aug. 30, 2009 NOTARY PUBLIC
Assessment Costs: \$ 228.95 (These costs are approximate and are subject to change.) This form shall

Pink - City Clerk

Yellow - Refuse Hauler

serve as notification of a pending assessment against the property.

White - Health Department



Authorization Number Location of Premises	09-01 2910 T Street					
Legal Description	Pitchers & Baldwins Sub, Block 3, Lot 8					
I, as Health Director, have fou	nd that:					
(5) day nuisance abatem The tenant or occupant	thorized agent) of the premises stated above has failed to comply with a five lent notice served in person or via certified mail on 11/19/08. of said premises has failed to comply with a five (5) day nuisance abatement notice ertified mail on//					
Therefore, by virtue of the au refuse hauler to remove the c	thority vested in me by Lincoln Municipal Code Chapter 8.26.030, I hereby authorize a offensive substances constituting a declared public nuisance existing on the premises					

Stated above.

Russ Arat 1,6,779

By the authority granted in Nuisance Abatement Authorization No. O9-O1 issued on 1 / 6 / 09 by the Director of the Lincoln-Lancaster County Health Department, and for a fee of \$ 60 to be paid by the Department, representatives of 7000 Cleared the premises at 7000 To 1000 Cleared the premises at 1000 1000 Cleared the premise at 1000 Cleared the 1000 Cleared the 1000 Cleared the 1000 Cleared t

Name of Hauler Representative (print)

Signature

Health Department Representative Signature

Signature 4000 E 1000

STATE OF NEBRASKA)
)ss.

County of Lancaster)

Before me, a notary public qualified for said County, personally came ________, known to me to be the identical persons who signed the foregoing Nuisance Abatement Authorization, and acknowledged the execution thereof to be a voluntary act and deed.

GENERAL NOTARY - State of Nebraska RONI R. OLANDER My Comm. Exp. Aug. 30, 2009

NOTARY PUBLIC

Assessment Costs: \$ 178 95 (These costs are approximate and are subject to change.) This form shall serve as notification of a pending assessment against the property.



Autho	rizat	ion P	lumb	ei
Locati	on o	f Pre	mise	S
Legal	Desc	ripti	on	

09-0	2_		ı					
7070	T S	+ 1	41100	ta .	Ma			
Pecks	Grove	SEN	WENE	- ~ A 3	19-10-7.	Block 16,	LOT IS	

I, as Health Director, have found that:
The owner (or his/her authorized agent) of the premises stated above has failed to comply with a five (5) day nuisance abatement notice served in person or via certified mail on 12/08/08. The tenant or occupant of said premises has failed to comply with a five (5) day nuisance abatement notice served in person or via certified mail on/
Therefore, by virtue of the authority vested in me by Lincoln Municipal Code Chapter 8.26.030, I hereby authorize a refuse hauler to remove the offensive substances constituting a declared public nuisance existing on the premises stated above.
Health Director Date
By the authority granted in Nuisance Abatement Authorization No. OG-O2 issued on 1 /6 /09 by the Director of the Lincoln-Lancaster County Health Department, and for a fee of \$ 600 to be paid by the Department, representatives of 600 to 500
Name of Hauler Representative (print) Signature Health Department Representative Signature Signature
STATE OF NEBRASKA))ss. County of Lancaster) Before me, a notary public qualified for said County, personally came
WITNESS MY HAND AND NOTORIAL SEAL THIS DAY OF DAY OF DOUGLE, 2009 GENERAL NOTARY - State of Nebraska RONI R. OLANDER My Comm. Exp. Aug. 30, 2009 NOTARY PUBLIC
Assessment Costs: \$ 166.55 (These costs are approximate and are subject to change.) This form shall serve as notification of a pending assessment against the property.

Pink - City Clerk

White - Health Department



Authorization Number Location of Premises			4 N 20	丝	
Legal Description	Montge	133 omery's A	idd, Lot 7		
	.	<i>.</i>	•		
I, as Health Director, have found	d that:				
☐ The owner (or his/her auth (5) day nuisance abatemen ☐ The tenant or occupant of served in person or via cer	nt notice served said premises h	in person or via c as failed to comp	ertified mail on	<u>12 9 08</u> .	
Therefore, by virtue of the auth refuse hauler to remove the off stated above.					
B. H	ealth Director	<u>K</u>		<u>/ 10 </u>	
By the authority granted in Nui Director of the Lincoln-Lancaste Department, representatives of of the conditions constituting a Licensed Refuse Hauler Name of Hauler Representa	er County Health A good So a public nuisance PARAGON tive (print)	Department, and	I for a fee of \$/ leared the prem	to be paid ises at 1774	by the
Health Department Represe	Signature entative	Has	and has be	PLHS	
	Signature	- Main a	April 1 P. F. W.		
STATE OF NEBRASKA))ss.	14 - 14 - 14 - 14 - 14 - 14 - 14 - 14 -	:		
County of Lancaster)		A section of the sect		
Before me, a notary purme to be the identical persons execution thereof to be a volur	who signed the ntary act and dec	foregoing Nuisaned.		Snice Day uthorization, and ac	known to knowledged the
RONI	RY - State of Nebraska R. OLANDER I. Exp. Aug. 30, 2009		1	NOTARY PUBLIC	<u> </u>

White - Health Department

serve as notification of a pending assessment against the property.

Assessment Costs:

Pink - City Clerk

\$ 196.35 (These costs are approximate and are subject to change.) *This form shall*



Authorization Number	09-04 844 Peach St.				
Location of Premises Legal Description	South Line	oln. Block	< 10, Lot 11	•	
<i>.</i>		•			
I, as Health Director, have found	d that:				
☐ The owner (or his/her auth (5) day nuisance abatemer ☐ The tenant or occupant of served in person or via cer	nt notice served in pe said premises has fa	erson or via cer illed to comply	tified mail on <u>/ 2</u>	129108	
Therefore, by virtue of the auth refuse hauler to remove the off stated above.					
H	ealth Director	•	/ / Date	<u>Oî</u>	
By the authority granted in Nui Director of the Lincoln-Lancaste Department, representatives of of the conditions constituting a Licensed Refuse Hauler	er County Health Dep	partment, and f	or a fee of \$ <i>100</i> ared the premises	to be paid by	the
Name of Hauler Representa	The state of the s	wil M	Stowart		:
Health Department Represe	entative	Hany A.	Heater REHS Agga REHS		
STATE OF NEBRASKA))ss.				
County of Lancaster)		Maria and a second a second and		
Before me, a notary pu me to be the identical persons execution thereof to be a volur	who signed the fore	d County, perso going Nuisance	nally came Abatement Autho	nization, and ackno	, known to wledged the
WITNESS MY HAND AN	D NOTORIAL SEAL TI	HIS 6	DAY OF	uary	<u> </u>
RON	ARY - State of Nebraska II R. OLANDER m. Exp. Aug. 30, 2009		- Raid	NOTARY PUBLIC	

White - Health Department

serve as notification of a pending assessment against the property.

Assessment Costs:

Pink - City Clerk

\$ 218.95 (These costs are approximate and are subject to change.) This form shall



Authorization Number Location of Premises Legal Description	09-05 U901 /Joens Normal P	- in the second	1 1/2 Lot 5	
		,		and the second second
I, as Health Director, have fou	nd that:			
The owner (or his/her au (5) day nuisance abatem The tenant or occupant of served in person or via co	ent notice served of said premises h	n person or via certified r as failed to comply with a	nail on <u>[2] } </u>	<u>2005</u>
Therefore, by virtue of the aurefuse hauler to remove the ostated above.				
	Health Director	<u>-</u>	/ , 7,0% Date	
By the authority granted in N Director of the Lincoln-Lancas Department, representatives of the conditions constituting	of Paragon	Sand Attion cleared th	-05 issued on _ e of \$ 3000 to ne premises at	1/7/09 by the be paid by the 101 Normal BLVD
Licensed Refuse Hauler	Parago	n Sanitation		
Name of Hauler Represent	tative (print) Signature	Scott PayiceK	J. W. Zil	
Health Department Repre	sentative Signature	Jamos E	ESARE	:
STATE OF NEBRASKA)			
County of Lancaster)ss.)			
Before me, a notary p		said County, personally c		and acknowledged the

WITNESS MY HAND AND NOTORIAL SEAL THIS

DAY OF January

PCKE

GENERAL NOTARY - State of Nebraska RONI R. OLANDER My Comm. Exp. Aug. 30, 2009

execution thereof to be a voluntary act and deed.

NOTARY PUBLIC

Assessment Costs: \$_166.35 (These costs are approximate and are subject to change.) This form shall serve as notification of a pending assessment against the property.



Authorization Number Location of Premises	Engleside A	1425	N. 24th		·
Legal Description	<u> Engleside &</u>	ada, Block	<u> </u>	> <u>35'.</u>	
I, as Health Director, have found The owner (or his/her author (5) day nuisance abatemen The tenant or occupant of served in person or via cert	orized agent) of the t notice served in pe said premises has fai	erson or via cert iled to comply v	ified mail on	<u> 1 6 1 09.</u>	
Therefore, by virtue of the authorefuse hauler to remove the offerstated above.	rity vested in me by nsive substances co	/ Lincoln Munici nstituting a dec	ipal Code Chapter clared public nuisa	8.26.030, I hereby a ance existing on the	authorize a premises
Zug He	alth Director		/ <u>/ / ථ /</u> Date	<u> </u>	
By the authority granted in Nuis Director of the Lincoln-Lancaste Department, representatives of of the conditions constituting a	County Health Dep	artment, and fo	or a fee of \$ 4%	to be paid by	the
Licensed Refuse Hauler	77.	<u> </u>	and the second		
Name of Hauler Representat	ive (print) Signature	15/10			
Health Department Represe	ntative Signature	Harly H	late PEHR		
STATE OF NEBRASKA County of Lancaster))ss.)			-	
Before me, a notary pul me to be the identical persons v execution thereof to be a volun	vho signed the foreg			orization, and ackno	, known to wledged the
WITNESS MY HAND AN) NOTORIAL SEAL TH	$+$ IIS $\underline{3}$	DAY OF	uary	_, <u> </u>
	State of Nebraska OLANDER p. Aug. 30, 2009		Rond	NOTARY PUBLIC	

White - Health Department

Pink - City Clerk

Assessment Costs: \$ 275.65 (These costs are approximate and are subject to change.) This form shall serve as notification of a pending assessment against the property.



Autho	riza	atio	n Nu	ımbei
Locat	ion	of F	rem	ises
Legal	Des	scrip	otion	1

2744 Star St East Park Add, Block 2, Lot 21, E/12 & Lot 22

I, as Health Director, have found that:	
 (5) day nuisance abatement notice serve ☐ The tenant or occupant of said premises served in person or via certified mail on 	······································
Therefore, by virtue of the authority vested in refuse hauler to remove the offensive substar stated above.	me by Lincoln Municipal Code Chapter 8.26.030, I hereby authorize a nces constituting a declared public nuisance existing on the premises
Health Director	<u>2121</u> Date
Director of the Lincoln-Lancaster County Heal	ent Authorization No. 01-08 issued on 2 / 2 / 01 by the th Department, and for a fee of \$ 6000 to be paid by the cleared the premises at 2 744 Story S
Licensed Refuse Hauler	Paragon Sanitation
Name of Hauler Representative (print) Signature	Scott Fajack X 2
Health Department Representative Signature	JAMES E BARE
STATE OF NEBRASKA))ss. County of Lancaster)	
me to be the identical persons who signed the execution thereof to be a voluntary act and described to the execution thereof to be a voluntary act and described to the execution thereof to be a voluntary act and described to the execution thereof to be a voluntary act and described to the execution thereof to be a voluntary act and described to the execution thereof to be a voluntary act and described to the execution thereof to be a voluntary act and described to the execution thereof to be a voluntary act and described to the execution thereof to be a voluntary act and described to the execution thereof to be a voluntary act and described to the execution thereof to be a voluntary act and described to the execution thereof to be a voluntary act and described to the execution thereof to be a voluntary act and described to the execution thereof to be a voluntary act and described to the execution thereof to be a voluntary act and described to the execution thereof to be a voluntary act and described to the execution thereof to be a voluntary act and described to the execution thereof to be a voluntary act and described to the execution thereof the execution thereof to the execution thereof the execution thereof the execution the execution thereof the execution the execution the execution thereof the execution thereof the execution thereof the execution the execution thereof the execution thereof the execution thereof the execution thereof the execution the execution thereof the execution thereof the execution the execution the execution the execution thereof the execution the execution the execution thereof the execution the execution the execution thereof the execution thereof the execution the execution the execution thereof the execution the execution the execution thereof the execution thereof the execution the execution the execution thereof the execution the execution the execution thereof the execution the execution thereof the execution the execution thereof the execution the execution the execution the	
WITNESS MY HAND AND NOTORIAL S	SEAL THIS 2^{∞} DAY OF 1
GENERAL NOTARY - State of Nebraska RONI R. OLANDER My Comm. Exp. Aug. 30, 2009	NOTARY PUBLIC
Assessment Costs: \$ 196.35 (T	hese costs are approximate and are subject to change.) This form shall

White - Health Department

serve as notification of a pending assessment against the property.

Pink - City Clerk



Authorization Number Location of Premises	913 Rose Street South Lincoln, Block 19, Lots.	
Legal Description	South Lincoln, Block 19, Lot 5	
I, as Health Director, have found	I that:	
(5) day nuisance abatement ☐ The tenant or occupant of s	orized agent) of the premises stated above has failed to comply with a five at notice served in person or via certified mail on <u>/ 2 / 29 / 08</u> . said premises has failed to comply with a five (5) day nuisance abatement notice tified mail on/	
	ority vested in me by Lincoln Municipal Code Chapter 8.26.030, I hereby authorize a ensive substances constituting a declared public nuisance existing on the premises	
He	ealth Director Date	
Director of the Lincoln-Lancaster Department, representatives of	sance Abatement Authorization No. <u>09-59</u> issued on <u>2 / 4 / 09</u> by the r County Health Department, and for a fee of \$ 30 to be paid by the <u>fareum Southtran</u> cleared the premises at <u>913 Rose Struct</u> public nuisance on <u>2 / 5 / 09</u> .	<u> </u>
Licensed Refuse Hauler	Musgon Som Lution	
Name of Hauler Representat	signature DMT	
Health Department Represei	MAIN OF OFT	
STATE OF NEBRASKA)	
County of Lancaster)ss.)	
WITNESS MY HAND AND	D NOTORIAL SEAL THIS 4th DAY OF FEDERALLY 2009	
RO	OTARY - State of Nebraska ONI R. OLANDER Omm. Exp. Aug. 30, 2009 NOTARY PUBLIC	

Assessment Costs: \$________ (These costs are approximate and are subject to change.) This form shall serve as notification of a pending assessment against the property.



Authorization Number Location of Premises Legal Description	SUS KAOX St SUS KAOX St University Place, Exock 11, Lot9	
I, as Health Director, have found	d that:	
(5) day nuisance abatement (5) The tenant or occupant of	norized agent) of the premises stated above has failed to comply with a five nt notice served in person or via certified mail on $\frac{1}{1} \frac{1}{100} \frac{1}{100} \frac{1}{100}$. If said premises has failed to comply with a five (5) day nuisance abatement notice rtified mail on $\frac{1}{100} \frac{1}{100} \frac{1}{100} \frac{1}{100}$.	
	nority vested in me by Lincoln Municipal Code Chapter 8.26.030, I hereby authorize fensive substances constituting a declared public nuisance existing on the premises	
3 H	Jealth Director Date	
Director of the Lincoln-Lancasto Department, representatives of	isance Abatement Authorization No. OG - 10 issued on 2 / 10 / 09 by er County Health Department, and for a fee of \$_\$\line{\line{\lambda}} \line{\	the
Licensed Refuse Hauler	Paragon Sonitation	
Name of Hauler Representa	Signature Cord Stafford	
Health Department Represe	Signature James E Bare	THE WAS PERSON
STATE OF NEBRASKA	1	AND THE PROPERTY OF THE PROPER
STATE OF NEDRASIA)ss.	
County of Lancaster		
	who signed the foregoing Nuisance Abatement Authorization, and acknowledged ntary act and deed.	yn to I the
WITNESS MY HAND AN	ID NOTORIAL SEAL THIS 10th DAY OF FLOVILLA 12	$\overline{M}_{\mathcal{O}}$

Assessment Costs: \$ 168.95 (These costs are approximate and are subject to change.) This form shall serve as notification of a pending assessment against the property.

GENERAL NOTARY - State of Nebraska RONI R. OLANDER My Comm. Exp. Aug. 30, 2009

NOTARY PUBLIC



Autho	rizati	on N	umber
Locati	ion of	Prer	nises
Legal	Descr	iptio	n

09-11						
1434 M	. 22 1	%				
East Pari	∠ Add, I	BIOCK 2,	Lot 12.	EX 312	SQFT	onN
E, LO+ 13	592.6'	EX ST	Lot 14	592.6	'Ex ST	

I, as Health Director, have found that:
The owner (or his/her authorized agent) of the premises stated above has failed to comply with a five (5) day nuisance abatement notice served in person or via certified mail on/ The tenant or occupant of said premises has failed to comply with a five (5) day nuisance abatement notice served in person or via certified mail on/
Therefore, by virtue of the authority vested in me by Lincoln Municipal Code Chapter 8.26.030, I hereby authorize a refuse hauler to remove the offensive substances constituting a declared public nuisance existing on the premises stated above.
Health Director Date
By the authority granted in Nuisance Abatement Authorization No. D9-11 issued on 2 /10 /09 by the Director of the Lincoln-Lancaster County Health Department, and for a fee of \$ 50.00 to be paid by the Department, representatives of Paragon Sandakon cleared the premises at 1434 N 27 #2
of the conditions constituting a public nuisance on 2 / 11 / 09.
Name of Hauler Representative (print) Signature Health Department Representative Signature Signature Signature Signature Signature Signature Signature Signature Signature
STATE OF NEBRASKA))ss.
Before me, a notary public qualified for said County, personally came
WITNESS MY HAND AND NOTORIAL SEAL THIS 10 DAY OF FEDILIDIL 2009
GENERAL NOTARY - State of Nebraska RONI R. OLANDER My Comm. Exp. Aug. 30, 2009 NOTARY PUBLIC
Assessment Costs: \$ 168.95 (These costs are approximate and are subject to change.) This form shall

White - Health Department

serve as notification of a pending assessment against the property.

Pink - City Clerk



Authorization Number Location of Premises	107-12 2026 Lok Street
Legal Description	Pandall Place, Block 2, Lot 16
(5) day nuisance abatement	prized agent) of the premises stated above has failed to comply with a five t notice served in person or via certified mail on $\frac{1}{1000} \frac{1000}{1000} $
-	said premises has failed to comply with a five (5) day nuisance abatement notice ified mail on/
	ority vested in me by Lincoln Municipal Code Chapter 8.26.030, I hereby authorize a ensive substances constituting a declared public nuisance existing on the premises
Bo He	Palth Director Date
By the authority granted in Nuis Director of the Lincoln-Lancaster Department, representatives of of the conditions constituting a	r County Health Department, and for a fee of \$ to be paid by the cleared the premises at
·	2 mg - Can a land a
Name of Hauler Representat	sive (print) Signature
Health Department Represer	Signature Herry A. Ha for RENS Normal Manual Manua
STATE OF NEBRASKA))ss.
County of Lancaster	
	olic qualified for said County, personally came \(\frac{1}{\infty}\)\(\lambda \lambda
WITNESS MY HAND AND	D NOTORIAL SEAL THIS WAY OF TODAY OF SOURCE OF
GE	ENERAL NOTARY - State of Nebraska RONI R. OLANDER My Comm. Exp. Aug. 30, 2009 NOTARY PUBLIC

Assessment Costs: \$ 220.65 (These costs are approximate and are subject to change.) This form shall serve as notification of a pending assessment against the property.

White - Health Department Pink - City Clerk



Authorization Number Location of Premises	09-13	1944 L'S	treet	
Legal Description	Boggs and Hi	olmes Sub, L	treet of 21, WSO' E	100'
The owner (or his/her author (5) day nuisance abatement or occupant of served in person or via cert of the author refuse hauler to remove the offestated above.	that: prized agent) of the premise the notice served in person of the premises has failed to ified mail on// prity vested in me by Lincoln.	ses stated above has fa or via certified mail on comply with a five (5) ————————————————————————————————————	iled to comply with a fi O3 / O4/ ZO9 day nuisance abatemer pter 8.26.030, I hereby	ve nt notice authorize a
PERMIT HE	aith Director	·	te	
Health Department Represe	public nuisance on 3 /	nt, and for a fee of \$ cleared the prem	🔫 🛴 🐧 🐧 to be paid by	the
STATE OF NEBRASKA County of Lancaster))ss.)	o .		
Before me, a notary pub me to be the identical persons v execution thereof to be a volunt			uthorization, and acknow	, known to owledged the
WITNESS MY HAND AND	O NOTORIAL SEAL THIS 👤	2 DAY OF 1	aveh	<u> 2006</u>
F	NOTARY - State of Nebraska RONI R. OLANDER Comm. Exp. Aug. 30, 2009		NOTARY PUBLIC	engli.

White - Health Department

serve as notification of a pending assessment against the property.

Assessment Costs:

Pink - City Clerk

\$ 176.55 (These costs are approximate and are subject to change.) This form shall



Authorization Number	1
Location of Premises	
Legal Description	9

<u>09-14</u>	
1645 Washington Street	
Chases Sub, Brock 1, Lot 1	
•	

Location of Premises Legal Description	Chases Su	b, Brock1	Lot 2		
l, as Health Director, have fou	nd that:				
☐ The owner (or his/her aut (5) day nuisance abatemed ☐ The tenant or occupant of served in person or via ce	ent notice served in p of said premises has f	person or via certif ailed to comply w	ied mail on <u>3 / 12</u>	<u>-/ 09</u> .	tice
Therefore, by virtue of the aut refuse hauler to remove the o stated above.					
-	Health Director		<u>ී / /දි / ව ඉ</u> Date	-	
By the authority granted in Ni Director of the Lincoln-Lancas Department, representatives of of the conditions constituting	ter County Health De of $\frac{\hat{V}_{AA}}{2} = \frac{\hat{S}_{A}}{2}$ a public nuisance or	partment, and for the following section is the section of the section of the section is the section of the sect	a fee of \$ <u></u> \$5ed the premises at	to be paid by the	
Licensed Refuse Hauler Name of Hauler Represent	`* <u> </u>	Scott Palice	KAT.		
Health Department Repres	Signature sentative Signature	Harry Har-			
STATE OF NEBRASKA))ss.				
County of Lancaster)				
Before me, a notary p me to be the identical person execution thereof to be a volu	s who signed the for				nown to lged the
WITNESS MY HAND A	ND NOTORIAL SEAL	THIS $\frac{\sqrt{\chi^{4}}}{\sqrt{\chi^{4}}}$ D	AY OF \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		POR
GE	NERAL NOTARY - State of Nebrasi RONI R. OLANDER My Comm. Exp. Aug. 30, 2009		NOTAR) and v	

Assessment Costs: \$_203.95 (These costs are approximate and are subject to change.) This form shall serve as notification of a pending assessment against the property.



Authorization Number Location of Premises	09-15	- 405-407	5 760	
Legal Description	Youngs Eas	+ Lincoln, B	5. 76 E 10CK B, LOTI	1
	J	,	•	
I, as Health Director, have found	that:			
The owner (or his/her author (5) day nuisance abatement of the tenant or occupant of served in person or via cert. Therefore, by virtue of the author refuse hauler to remove the offestated above.	t notice served in personal premises has failed ified mail on/	on or via certified m I to comply with a f / ncoln Municipal Co	ail on <u>3 / f0 / 0</u> five (5) day nuisance a de Chapter 8.26.030,	9 batement notice I hereby authorize a
He	alth Director	_	<u> </u>	
	Parga Santa	ment, and for a fee cleared the 18/09	to be premises at 405	paid by the
Name of Hauler Representat	ive (print) <u></u> Signature	att Earlie	ex date	
Health Department Represe	ntative <u>#v</u> Signature	y Hears RE. Hanglefff RE)	45 C	
STATE OF NEBRASKA)			
County of Lancaster)SS.)	,		,
Before me, a notary pub me to be the identical persons v execution thereof to be a volunt	vho signed the foregoi			, known to nd acknowledged the
WITNESS MY HAND AND			: March	<u> 2009</u>
RONI	Y - State of Nebraska R. OLANDER Exp. Aug. 30, 2009		DAZO	Q-As-V
			NOTARY PUI	BLIC

White - Health Department

serve as notification of a pending assessment against the property.

Assessment Costs:

Pink - City Clerk

\$ 201.35 (These costs are approximate and are subject to change.) This form shall



Authorization Number	09-16	- Lin 6	718 0	
Location of Premises	Valuat Fo	<u>71/ 2,</u>	. 76 E G.	L 17
Legal Description	Tourigs ca	ar chirchin	L DIOCIE OL PA	T 1 4
	•			
I, as Health Director, have found	that:			
 The owner (or his/her author) (5) day nuisance abatement □ The tenant or occupant of served in person or via certification 	notice served in pers aid premises has faile	son or via certificed to comply with	ed mail on <u>3 //</u> 0	109.
Therefore, by virtue of the authorefuse hauler to remove the offe stated above.				
He	alth Director		3 / / / 09 Date	
				· ·
By the authority granted in Nuis Director of the Lincoln-Lancaster Department, representatives of of the conditions constituting a	County Health Departure San take public nuisance on	rtment, and for a cleare 3 /18 / 09	a fee of \$ 70	to be paid by the
Licensed Refuse Hauler	Parga Santile			
Name of Hauler Representat	ive (print) <u>S</u> Signature	-off Zaj,	COK A DA	3/
Health Department Represer	ntative	Harry Hear	REHS C	
		77.7		*
STATE OF NEBRASKA) SSS.			
County of Lancaster) .			e de la companya de La companya de la co
Before me, a notary pub me to be the identical persons w execution thereof to be a volunt	who signed the forego			n, and acknowledged the
WITNESS MY HAND AND	NOTORIAL SEAL THI	s <u>18</u> da	W OF March	
FI I	NOTARY - State of Nebraska ONI R. OLANDER Comm. Exp. Aug. 30, 2009		NOTAR	Y PUBLIC

White - Health Department

serve as notification of a pending assessment against the property.

Assessment Costs:

Pink - City Clerk

\$ 206.35 (These costs are approximate and are subject to change.) This form shall



Authorization Number	09-17	1120 A	
Location of Premises	Burrs (CC) SL	1649 Prospect	
Legal Description	Burrs (CC) Sc	<u>ibdivision, Bloc</u>	<u>k</u> 8, Lot 5
•			
and the first of t			
I, as Health Director, have found th	at:		
The owner (or his/her authorize (5) day nuisance abatement in the tenant or occupant of sail served in person or via certific	otice served in person of d premises has failed to	or via certified mail on comply with a five (5	<u> 3 13 09 .</u>
Therefore, by virtue of the authority refuse hauler to remove the offens stated above.			apter 8.26.030, I hereby authorize a nuisance existing on the premises
Healt	th Director	<u>3,/</u>	<u>19,07</u> ate
Director of the Lincoln-Lancaster C Department, representatives of of the conditions constituting a pu	ounty Health Departme	ent, and for a fee of \$ cleared the pren	issued on 3 / 19 / 09 by the to be paid by the nises at 1624 Passics +
Name of Hauler Representative		1 MSteph	rust
Health Department Represent	ative	thoughter	PEHS
STATE OF NEBRASKA)			
County of Lancaster)	•	government of the second	
Before me, a notary public me to be the identical persons wh execution thereof to be a voluntar	o signed the foregoing		Authorization, and acknowledged the
WITNESS MY HAND AND N	OTORIAL SEAL THIS	$\sqrt{g_{ij}}$ day of \sqrt{g}	<u> Jarch</u> 2009
	NUTARY - State of Nebraska RONI R. OLANDER My Comm. Exp. Aug. 30, 2009	4	NOTARY PURIC

Assessment Costs: \$_168.95_ (These costs are approximate and are subject to change.) This form shall serve as notification of a pending assessment against the property.



Authorization	Numbe
Location of Pro	emises
Legal Descript	ion

1321 Greenwad St Impoffs Addition to University Price, Blork 37, Lot 4 1 Elo' Lot 5

l; as Health Director, have four	nd that:			
(5) day nuisance abateme	ent notice served	in person or via certified	ove has failed to comply with a mail on <u>2 / 5 / 269</u> . a five (5) day nuisance abateme	
refuse hauler to remove the o stated above.	ffensive substand	es constituting a declared	Code Chapter 8.26.030, I hereby d public nuisance existing on th	
F	Health Director	 	Date	
	····			
Director of the Lincoln-Lancas	ter County Healt of <u>Paragon</u>	h Department, and for a f	From the premises at 4300 for $3/24$ for	y the
Licensed Refuse Hauler	teresse	professor the		
Name of Hauler Represent	: :	ROBERT HAREN	>	
Health Department Repres	sentative Signature	Harry Hear	e BHC REHS	
STATE OF NEBRASKA)	14-		,;
County of Lancaster)ss.)			
Before me, a notary p me to be the identical person execution thereof to be a volu	s who signed the		came <u>Mill</u> Content tement Authorization, and ackr	, known to nowledged the
WITNESS MY HAND A	ND NOTORIAL SE	EAL THIS OH DAY	of March	
	NOTARY - State of Nebrask RONI R. OLANDER Comm. Exp. Aug. 30, 2009	a	NOTARY PUBLIC	<u> </u>

Assessment Costs: \$ 208.95 (These costs are approximate and are subject to change.) This form shall serve as notification of a pending assessment against the property.



Autho	rization	Number
Locati	on of P	remises
Legal	Descrip	tion

09-19		
GSOI FRANKLIN	57	
Park Manor Suk		

Legal Description	Park Manor	<u>SUB, Block 14</u>	7, LO+1	
-		•		
, as Health Director, have found	that:			
The owner (or his/her author (5) day nuisance abatemen The tenant or occupant of served in person or via cert	t notice served in per said premises has fail	son or via certified ma ed to comply with a fi	il on <u>~ 126109</u> .	
Therefore, by virtue of the authorefuse hauler to remove the offestated above.				
- Bur He	ealth Director	· · · · · · · · · · · · · · · · · · ·	Date	
Name of Hauler Representat Health Department Represe	public nuisance on	<u>් 20 </u> cleared the <u>යි / 25/ 0</u> .	issued on 3 /2 of \$ 75 to be paid premises at 650 / 0	A/O1 by the
STATE OF NEBRASKA County of Lancaster))ss.)			
Before me, a notary pub me to be the identical persons v execution thereof to be a volun	who signed the foreg			, known to cknowledged the
WITNESS MY HAND ANI	O NOTORIAL SEAL TH	IS AU DAY OF	March	
RONI	Y - State of Nebraska R. OLANDER Exp. Aug. 30, 2009		NOTARY PUBLIC	<u> </u>

Assessment Costs: \$_211,35 (These costs are approximate and are subject to change.) This form shall serve as notification of a pending assessment against the property.



Authorization	Number
Location of Pr	emises
Legal Descript	ion

09-20	12	
425 1. 2	× TO	
Houtz & Boldu	sins Sub (of W1/2 NWSW19-10-7)	
BIOCK b, LOH.	2 51/2	

4, 2, 09 Date

I, as Health Director, have found that:

- 🖪 The owner (or his/her authorized agent) of the premises stated above has failed to comply with a five
- (5) day nuisance abatement notice served in person or via certified mail on 3/26/09.

 The tenant or occupant of said premises has failed to comply with a five (5) day nuisance abatement notice served in person or via certified mail on 3/26/09.

Therefore, by virtue of the authority vested in me by Lincoln Municipal Code Chapter 8.26.030, I hereby authorize a refuse hauler to remove the offensive substances constituting a declared public nuisance existing on the premises stated above.

			•
Director of the Lincoln-Lanca	ster County Healt	nent Authorization No. <u>クラー 2 ク</u> issued on <u>4 / 2</u> Ith Department, and for a fee of \$ <u>/ クラー</u> to be paid I	oy the
of the conditions constituting			
Licensed Refuse Hauler	Paragon	Donitation Ire	
Name of Hauler Represen	tative (print) Signature	RYAN K HATTEN	
Health Department Repre	esentative Signature	JAME BARE REHS James E Sans Reps	
STATE OF NEBRASKA))ss.		
County of Lancaster)		
	ns who signed the	for said County, personally came	, known to nowledged the
WITNESS MY HAND	AND NOTORIAL S	SEAL THIS Que DAY OF Horiz	<u>eok</u> ,
GENERAL N	NOTARY - State of Nebraska ONI R. OLANDER		<i></i>
My (Comm. Exp. Aug. 30, 2009	NOTARY DURI IC	

\$ 2.01. 55 (These costs are approximate and are subject to change.) This form shall Assessment Costs: serve as notification of a pending assessment against the property.

NOTARY PUBLIC



Authorization Number Location of Premises	09-21	- 1425 N. 3	24 54.	
Legal Description	Engleside A	Add, Block 1	24" St. Lot 4, S33'	
I, as Health Director, have found	I that:			
The owner (or his/her auth (5) day nuisance abatement. The tenant or occupant of served in person or via cert	it notice served in perso said premises has failed	on or via certified mai d to comply with a fiv	l on <u>03/24/09</u> .	k.
Therefore, by virtue of the authorefuse hauler to remove the offestated above.				
Be	ealth Director	sociem 4	//	
By the authority granted in Nuis Director of the Lincoln-Lancaste Department, representatives of of the conditions constituting a Licensed Refuse Hauler	r County Health Depart	ment, and for a fee of cleared the p	f \$ 75 00 to be paid	by the
Name of Hauler Representa		MK M St	want	
Health Department Represe	ntative Signature	ama Elsan lams & Bar	e REHS Pehs	· · · · · · · · · · · · · · · · · · ·
STATE OF NEBRASKA)			
County of Lancaster)ss.)			
Before me, a notary pul me to be the identical persons of execution thereof to be a volun WITNESS MY HAND AN	who signed the foregoi tary act and deed.	ing Nuisance Abateme		, known to knowledged the
GENERAL N	OTARY - State of Nebraska ONI R. OLANDER omm. Exp. Aug. 30, 2009		NOTARY PUBLIC	

White - Health Department

serve as notification of a pending assessment against the property.

Assessment Costs:

Pink - City Clerk

\$ 273. 05 (These costs are approximate and are subject to change.) *This form shall*



Autho	rizat	ion	Numb	ei
Locat	ion a	f Pre	emise	5
Legal	Desc	ripti	on	

1011 1. 60 th St HOVELOCK - BLOCK 77 LOT 5

Legal Description $\underline{\hspace{1cm}}$	iangiocie i pic	OCK 77, LOT	Samuel Samuel	
l, as Health Director, have found that	••			
The owner (or his/her authorize (5) day nuisance abatement not ☐ The tenant or occupant of said served in person or via certified	ice served in person o premises has failed to	or via certified mail comply with a five	on <u> </u>	
Therefore, by virtue of the authority refuse hauler to remove the offensive stated above.				
Buyer Health	Director	4	1 <u>1</u> 1 <u>6</u> Date	
By the authority granted in Nuisance Director of the Lincoln-Lancaster Council Department, representatives of Part of the conditions constituting a pub	HUSOU	cleared the p	2 issued on _4 / _7 \$ to be paid b remises at// N (a)	/ <u>O</u> G by the y the
Name of Hauler Representative				
Health Department Representat Sigr	ive nature	mes St	ME REAS	
STATE OF NEBRASKA))ss. County of Lancaster)			· .	
Before me, a notary public of me to be the identical persons who execution thereof to be a voluntary of	signed the foregoing			, known to nowledged the
WITNESS MY HAND AND NO	TORIAL SEAL THIS	DAY OF_	Honi	, <u>2009</u>
RON	ARY - State of Nebraska NI R. OLANDER nm. Exp. Aug. 30, 2009		NOTARY PUBLIC	· · · · · · · · · · · · · · · · · · ·

Assessment Costs: \$_188,75_ (These costs are approximate and are subject to change.) This form shall serve as notification of a pending assessment against the property.



Authorization	Number
Location of Pr	emises
Legal Descript	ion

09-13	
9203 ORChard St	
Braces Subdivision, L	D+ 12

7/<u>1/09</u> Date

I, as Health Director, have found that:

🙀 The owner (or his/her authorized agent) of the premises stated above has failed to comply with a five

(5) day nuisance abatement notice served in person or via certified mail on 3 /3/ / 09.

The tenant or occupant of said premises has failed to comply with a five (5) day nuisance abatement notice served in person or via certified mail on 3 /3/ / 09.

Therefore, by virtue of the authority vested in me by Lincoln Municipal Code Chapter 8.26.030, I hereby authorize a refuse hauler to remove the offensive substances constituting a declared public nuisance existing on the premises stated above.

By the authority granted in Director of the Lincoln-Land Department, representative of the conditions constituti	aster County Heal	th Department, and	for a fee of \$ 4 /5		e ,
Licensed Refuse Hauler	PARAGON	Savitation	·		
Name of Hauler Represe	ntative (print) Signature	Dentl Dut t	m Stoward		
Health Department Rep	resentative Signature	James	Back	reds	3
STATE OF NEBRASKA))ss.	<u>:::</u>			
County of Lancaster)			> ()	
Before me, a notary me to be the identical person execution thereof to be a ve	ons who signed th	e foregoing Nuisan		norization, and acknowl	, known to edged the
WITNESS MY HAND	AND NOTORIAL S	SEAL THIS	_ DAY OF	i.	2009
	NOTARY - State of Nebraska RONI R. OLANDER,	ı		DA	

serve as notification of a pending assessment against the property.

Assessment Costs:

My Comm. Exp. Aug. 30, 2009

\$ 181,35 (These costs are approximate and are subject to change.) This form shall



Legal Description Chases Sub, Block 2, Lof 2	
I, as Health Director, have found that:	
The owner (or his/her authorized agent) of the premises stated above has failed to comply with a five (5) day nuisance abatement notice served in person or via certified mail on 64/03/09. The tenant or occupant of said premises has failed to comply with a five (5) day nuisance abatement served in person or via certified mail on/	
Therefore, by virtue of the authority vested in me by Lincoln Municipal Code Chapter 8.26.030, I hereby a refuse hauler to remove the offensive substances constituting a declared public nuisance existing on the p stated above.	
Bus Nat 419109 Health Director Date	
By the authority granted in Nuisance Abatement Authorization No	he ,
of the conditions constituting a public nuisance on <u>04110109</u> . Licensed Refuse Hauler	
Name of Hauler Representative (print)	
Signature	
· · · · · · · · · · · · · · · · · · ·	
Signature Health Department Representative Signature Heavy Heaver Fills Heavy Heaver Fills STATE OF NEBRASKA	
Health Department Representative Signature Health Department Representative Health PEHS	
Signature Health Department Representative Signature Houry fee for fithe Houry fee for fithe	_, known to
Signature Health Department Representative Signature Horry, Health FEHC STATE OF NEBRASKA) Sss. County of Lancaster Before me, a notary public qualified for said County, personally came	

White - Health Department

Pink - City Clerk

Assessment Costs: \$188.95 (These costs are approximate and are subject to change.) This form shall serve as notification of a pending assessment against the property.



Autho	riza	ation	Number
Locat	ion	of Pr	emises
Legal	De:	script	tion

09	25					
1130	1. 29	115				
E0s+	Park	Second	Addition.	ELOCK 9.	Lot II	

egal DescriptionEast Park Second Addition, Elock 9, Lot 11	
, as Health Director, have found that:	
The owner (or his/her authorized agent) of the premises stated above has failed to comply with a five (5) day nuisance abatement notice served in person or via certified mail on//	tice
Therefore, by virtue of the authority vested in me by Lincoln Municipal Code Chapter 8.26.030, I hereby auth efuse hauler to remove the offensive substances constituting a declared public nuisance existing on the prer tated above.	
Health Director 4 10 9 Date	
By the authority granted in Nuisance Abatement Authorization No. $09 - 25$ issued on $4 / 21 / 09$ Director of the Lincoln-Lancaster County Health Department, and for a fee of $5 / 000$ to be paid by the Department, representatives of $100 - 100$ and $100 - 100$ cleared the premises at $100 - 100$ of the conditions constituting a public nuisance on $100 - 100$.	i by the
Licensed Refuse Hauler to co on South to to Lac-	
Name of Hauler Representative (print) Signature	
Health Department Representative Signature JAMES SBARE REHS JAMES SBARE REHS JAMES SBARE REHS	
STATE OF NEBRASKA))ss.	
County of Lancaster)	
Before me, a notary public qualified for said County, personally came \(\frac{1}{2}\)\(\lambda \lambda \lambda \rangle \frac{1}{2}\)\(\lambda \lambda \rangle \frac{1}{2}\)\(\lambda \rangle \lambda \rangle \rangle \frac{1}{2}\)\(\lambda \rangle \lambda \rangle \r	cnown to dged the
WITNESS MY HAND AND NOTORIAL SEAL THIS 21 DAY OF 1701	PCPR
GENERAL NOTARY - State of Nebraska RONI R. OLANDER	•
My Comm. Exp. Aug. 30, 2009 NOTARY PUBLIC	
Accordant Costs: \$ 3.72 95 (Those costs are approximate and are subject to change). This fo	rm chall

Assessment Costs: \$ 223.95 (These costs are approximate and are subject to change.) This form shall serve as notification of a pending assessment against the property.



Authorization Number Location of Premises	<u>09-26</u> 1200 5 16 ¹² 54.
Legal Description	1200 5. 16th St. Lincoln Original, Block 214, Lot 6, N 61.5'
I, as Health Director, have found	that:
(5) day nuisance abatement The tenant or occupant of s	orized agent) of the premises stated above has failed to comply with a five at notice served in person or via certified mail on O'//15/2009 said premises has failed to comply with a five (5) day nuisance abatement notice tified mail on/
	ority vested in me by Lincoln Municipal Code Chapter 8.26.030, I hereby authorize a ensive substances constituting a declared public nuisance existing on the premises
Jun He	ealth Director Date
Director of the Lincoln-Lancaster	sance Abatement Authorization No. $09-26$ issued on $4/12/09$ by the r County Health Department, and for a fee of \$ 40^{60} to be paid by the public nuisance on $4/23/09$.
Licensed Refuse Hauler	Paragon Sanitation
Name of Hauler Representat	
Health Department Represe	ntative Signature AMESESARE REHI FAMOSESARE FELS ARE FELS ARE FELS FEL
STATE OF NEBRASKA))ss.
County of Lancaster)
	blic qualified for said County, personally came \(\frac{1}{\infty}\) \(\lambda \lambda \tau \), known to who signed the foregoing Nuisance Abatement Authorization, and acknowledged the tary act and deed.
WITNESS MY HAND AND	D NOTORIAL SEAL THIS 22 DAY OF $Hpyll$, 200
	AL NOTARY - State of Nebraska RONI R. OLANDER My Comm. Exp. Aug. 30, 2009 NOTARY PUBLIC

serve as notification of a pending assessment against the property.

Assessment Costs:

(These costs are approximate and are subject to change.) This form shall



				42			
Authorization Number Location of Premises Legal Description	09-27 Youngs	East L	24 00 incoin, E	N Sta	et LO+ 9-11		
I, as Health Director, have four	nd that:						•
The owner (or his/her aut (5) day nuisance abatemed The tenant or occupant of served in person or via ce	ent notice serve of said premises	d in person has failed t	or via certific o comply wit	ed mail on 🛭	411012	009	tice
Therefore, by virtue of the aut refuse hauler to remove the or stated above.							
B	Me Vind Health Director			<u>4 129</u> Dat	<u></u>		
By the authority granted in No Director of the Lincoln-Lancas Department, representatives of of the conditions constituting	ter County Heal of <u>Congon Con</u> a public nuisan	th Departm ce on <u>4</u>	ent, and for a Inc cleare / ፲፻ / ፲፻ ٩	a fee of \$ d the premis	<u>२५ 🎾</u> to be	e paid by the	_ by the
Licensed Refuse Hauler	Rope		<u>ahon</u>			2	
Name of Hauler Represent	ative (print) Signature	<u>Para a</u> Kabana	bank C make 0 ;	e for			
Health Department Repres	entative Signature		Harry 1	1 25 E P	EHS FENS		
STATE OF NEBRASKA)					Manusca de la composição	
County of Lancaster)ss. ''')				, (
Before me, a notary p me to be the identical persons execution thereof to be a volu	who signed th	e foregoing			thorization, a		known to dged the
WITNESS MY HAND A	ND NOTODIAL S	EAI THIC	DC	V OF	7n 0	<u> </u>	PYIC

Assessment Costs: \$ 361.35 (These costs are approximate and are subject to change.) This form shall serve as notification of a pending assessment against the property.

GENERAL NOTARY - State of Nebraska RONI R. OLANDER My Comm. Exp. Aug. 30, 2009

NOTARY PUBLIC



White - Health Department

Lincoln-Lancaster County Health Department Nuisance Abatement Authorization

Authorization Number Location of Premises	09-18	1834	Prospect St.	
Legal Description	Prospect	sub, cor II		
l, as Health Director, have fou	ınd that:			
☐ The owner (or his/her au (5) day nuisance abatem ☐ The tenant or occupant served in person or via c	of said premises has	failed to comply wit	bove has failed to comply with ed mail on $04/09/2009$ h a five (5) day nuisance abate	a five ment notice
			l Code Chapter 8.26.030, I here ed public nuisance existing on	
	Aug (a) Health Director		5 / 09 Date	
Director of the Lincoln-Lanca	ster County Health D	Department, and for a	$\begin{array}{c c} 09-28 \text{ issued on } \underline{5} & \underline{/}\underline{3} \\ \text{a fee of } \underline{5} & \underline{/}\underline{5} & \text{to be paid} \\ \text{d the premises at } & \underline{/}\underline{3}\underline{/}\underline{3}\underline{/}\underline{3} \\ \end{array}$	by the
Licensed Refuse Hauler	attending the tength of the same	The second secon	· .	
Name of Hauler Represen	tative (print) _ Signature	and the state of t		
Health Department Repre	sentative	Hony whole	14 63 LEMS	
STATE OF NEBRASKA))ss.		The state of the s	
County of Lancaster)			
Before me, a notary me to be the identical persor execution thereof to be a vol	ns who signed the fo	oregoing Nuisance Ab	ly came Dille Day A	, known to cknowledged the
WITNESS MY HAND	and notorial șeal	L THIS <u>&</u> DA	Y OF	2009
RON	RY - State of Nebraska I R. OLANDER m. Exp. Aug. 30, 2009		NOTARY PUBLIC	<u></u>
Assessment Costs: \$serve as notification of a pe			ate and are subject to change.) ty.	This form shall

Pink - City Clerk



Authorization Number Location of Premises	09-29	2024	5. 181 Stud	
Legal Description	Harwoo	ds Add, Blo	5. 181 Street (K3, Lot 15	
I, as Health Director, have fou	ınd that:			
	nent notice served in of said premises ha	n person or via cert as failed to comply	d above has failed to comply tified mail on <u>05/12/0</u> with a five (5) day nuisance a	<u>59</u> .
Therefore, by virtue of the au refuse hauler to remove the ostated above.				
B.	Health Director	<u>.</u>	5 ,26 , 07 Date	
By the authority granted in N Director of the Lincoln-Lanca Department, representatives of the conditions constituting	ster County Health of <u>farage</u> g a public nuisance	Department, and for m latin clean on 65 / 27 / 20	or a fee of \$ <u>んんで</u> to be ared the premises at <u>Zの 2</u> 202 9	e paid by the とソータ・リピーにんか
Licensed Refuse Hauler	PARAGE.	N SANT	TATICALINC	· ·
Name of Hauler Represen	tative (print) Signature	Steve	Hatten Fatter	*
Health Department Repre	sentative Signature	Harry Ha	Les BEHS	
STATE OF NEBRASKA))ss.	,		
County of Lancaster).			a war no
Before me, a notary property me to be the identical person execution thereof to be a vol	ns who signed the f	foregoing Nuisance		$ \underbrace{\mathcal{N} f}_{} $, known to and acknowledged the
WITNESS MY HAND A	AND NOTORIAL SEA	IL THIS 26	DAY OF May	<u> 2009</u>
BC RC	DTARY - State of Nebraska DNI R. OLANDER omm. Exp. Aug. 30, 2009	· · · · · · · · · · · · · · · · · · ·	NOTARY PU	Mander BLIC
Assessment Costs: \$10	<u> </u>	se costs are approx	imate and are subject to cha	nge.) <i>This form shall</i>

White - Health Department

serve as notification of a pending assessment against the property.

Pink - City Clerk



Autho	oriza	ation	Numb	eı
Locat	ion	of Pr	emises	
Legal	Des	cript	ion	

09-3	30							
540	M	284						
Hout 2	Fj	Baldwins	Sub (Of	W1/2	NWSW	17-10-7	BIOCK 4	LOFE

, as Health Director, have found that:
The owner (or his/her authorized agent) of the premises stated above has failed to comply with a five (5) day nuisance abatement notice served in person or via certified mail on/ The tenant or occupant of said premises has failed to comply with a five (5) day nuisance abatement notice served in person or via certified mail on/
Therefore, by virtue of the authority vested in me by Lincoln Municipal Code Chapter 8.26.030, I hereby authorize a refuse hauler to remove the offensive substances constituting a declared public nuisance existing on the premises stated above.
Health Director Date
By the authority granted in Nuisance Abatement Authorization No. <u>09-30</u> issued on <u>6 / 2 / 09</u> by the Director of the Lincoln-Lancaster County Health Department, and for a fee of \$ 60 to be paid by the Department, representatives of <u>Valagon Santation</u> cleared the premises at <u>540 N</u> 29
of the conditions constituting a public nuigance on <u>04/02/09</u> .
Licensed Refuse Hauler Pacagn Santation
Name of Hauler Representative (print) Scott Zaj CK Signature
Health Department Representative Signature Ames EBAN REHS
STATE OF NEBRASKA))ss.
County of Lancaster)
Before me, a notary public qualified for said County, personally came \(\frac{1}{2} \) \(\frac{1}{2} \) \(\frac{1}{2} \), known to me to be the identical persons who signed the foregoing Nuisance Abatement Authorization, and acknowledged the execution thereof to be a voluntary act and deed.
WITNESS MY HAND AND NOTORIAL SEAL THIS 2^{10} DAY OF 3^{10}
GENERAL NOTARY - State of Nebraska RONI R: OLANDER My Comm. Exp. Aug. 30, 2009 NOTARY PUBLIC
My Comm. Exp. Aug. 30, 2009 NOTARY PUBLIC

Assessment Costs: \$_178.95 (These costs are approximate and are subject to change.) This form shall serve as notification of a pending assessment against the property.



			lumbei
Locati	ion o	f Pre	mises
Legal	Desc	ripti	on

09-31	Rufro Prof	Mr.	,		
	11-18-419-012-000				
Hub Hall	Heights 1호 Addi	ition. (<u>Jutiot C</u>	50,10+	Acres In
the East	t Part+ (07-473)	8I)			

the East Part (07-47381)
I, as Health Director, have found that:
The owner (or his/her authorized agent) of the premises stated above has failed to comply with a five (5) day nuisance abatement notice served in person or via certified mail on OS / 20 / 2004 The tenant or occupant of said premises has failed to comply with a five (5) day nuisance abatement notice served in person or via certified mail on/
refuse hauler to remove the offensive substances constituting a declared public nuisance existing on the premises stated above.
Health Director 6 19 109 Date
By the authority granted in Nuisance Abatement Authorization No. <u>OG - 31</u> issued on <u>6 / 8 / 09</u> by the Director of the Lincoln-Lancaster County Health Department, and for a fee of \$ <u>/ 90</u> to be paid by the Department, representatives of <u>Recaper</u> Same taken cleared the premises at
of the conditions constituting a public nuisance on 66/11/2009
Licensed Refuse Hauler Paragon Sandation Name of Hauler Representative (print) Signature Health Department Representative Signature Havy A. Has for Many Many Many Many Many Many Many Many
CTATE OF MEDDAGKA
STATE OF NEBRASKA))ss. County of Lancaster)
Before me, a notary public qualified for said County, personally came $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$, known to me to be the identical persons who signed the foregoing Nuisance Abatement Authorization, and acknowledged the execution thereof to be a voluntary act and deed.
WITNESS MY HAND AND NOTORIAL SEAL THIS $\underline{q}^{rac{1}{2}}$ day of \underline{Juu} , $\underline{2009}$
GENERAL NOTARY - State of Nebraska RONI R. OLANDER My Comm. Exp. Aug. 30, 2009 NOTARY PUBLIC
Assessment Costs: \$_326.35 (These costs are approximate and are subject to change.) This form shall serve as notification of a pending assessment against the property.

White - Health Department

Pink - City Clerk



Authorization Number	09-32					
Location of Premises Legal Description	Brookline Addition, Bloc	K.A. 1 mt 2				
Legal Description	Brookling Mainton, Bloc	F-4, LOTZ				
I, as Health Director, have four	d that:					
(5) day nuisance abateme ☐ The tenant or occupant of	norized agent) of the premises stated ab nt notice served in person or via certified f said premises has failed to comply with rtified mail on/	ove has failed to comply with a five d mail on <u>P6 /09 / 2009</u> . n a five (5) day nuisance abatement notice				
		Code Chapter 8.26.030, I hereby authorize a ed public nuisance existing on the premises				
3	Health Director	6 / 15 / 64 Date				
Director of the Lincoln-Lancas Department, representatives of	isance Abatement Authorization No. <u>C</u> er County Health Department, and for a few same same same same same same same same	fee of \$ 50.00 to be paid by the the premises at 309 5.250				
Name of Hauler Represent		1 Chap. 1				
Health Department Repres	entative Signature Augustus	ta Co				
STATE OF NEBRASKA)					
County of Lancaster)ss.					
		y came \(\frac{\frac{1}{\finn}}}}}}}}{\frac{1}}{\frac{1}{				
WITNESS MY HAND A	ND NOTORIAL SEAL THIS $\underline{\hspace{1.5cm}}$ Day	OF June 200°				
R(TARY - State of Nebraska NI R. OLANDER mm. Exp. Aug. 30, 2009	NOTARY PUBLIC				

White - Health Department

serve as notification of a pending assessment against the property.

Assessment Costs:

Pink - City Clerk

\$_198.95 (These costs are approximate and are subject to change.) This form shall



Authorization Number Location of Premises Legal Description Oq. 33 Eqst Par	N. Z5 ¹ K Second Addition, Block 4, Lot 6, E76'
I, as Health Director, have found that:	
(5) day nuisance abatement notice served	of the premises stated above has failed to comply with a five d in person or via certified mail on OG/10/2009. The premises stated above has failed to comply with a five (5) day nuisance abatement notice
	me by Lincoln Municipal Code Chapter 8.26.030, I hereby authorize a ces constituting a declared public nuisance existing on the premises
Health Director	<u>C /)G / D9</u> Date
By the authority granted in Nuisance Abatemed Director of the Lincoln-Lancaster County Healt Department, representatives of	ent Authorization No. 09-33 issued on 6 /16/09 by the h Department, and for a fee of \$ 220 to be paid by the cleared the premises at 1105 N, 250 ce on 06/19 /209.
Licensed Refuse Hauler Paraga	Savi totian
Name of Hauler Representative (print) Signature	Steve American Stevenson
Health Department Representative Signature	Harry Heafer

STATE OF NEBRASKA

)ss.

County of Lancaster

Before me, a notary public qualified for said County, personally came _______, known to me to be the identical persons who signed the foregoing Nuisance Abatement Authorization, and acknowledged the execution thereof to be a voluntary act and deed.

DAY OF

WITNESS MY HAND AND NOTORIAL SEAL THIS N

GENERAL NOTARY - State of Nebraska RONI R. OLANDER My Comm. Exp. Aug. 30, 2009

NOTARY PUBLIC

Assessment Costs: \$ 338 A5 (These costs are approximate and are subject to change.) This form shall serve as notification of a pending assessment against the property.

White - Health Department

Pink - City Clerk



Autho	riz	atio	n N	umb	er
Locat	on	of I	Prer	nise	5
Legal	De:	scri	otic	n	

09-34 6935 Colfax Avenue woods Bros Second Add to Havelock, Block 19, Lot 3-4

I, as Health Director, have found that: ☑ The owner (or his/her authorized agent) of the premises stated above has failed to comply with a five (5) day nuisance abatement notice served in person or via certified mail on 6/17/09. ☑ The tenant or occupant of said premises has failed to comply with a five (5) day nuisance abatement notice served in person or via certified mail on 6/11/09. Therefore, by virtue of the authority vested in me by Lincoln Municipal Code Chapter 8.26.030, I hereby authorize a refuse hauler to remove the offensive substances constituting a declared public nuisance existing on the premises stated above. By the authority granted in Nuisance Abatement Authorization No. 09-34 issued on 6/30/09 by the Director of the Lincoln-Lancaster County Health Department, and for a fee of \$ to be paid by the Department, representatives of Valagon Son to the cleared the premises at of the conditions constituting a public nuisance on **Licensed Refuse Hauler** Name of Hauler Representative (print) **Signature Health Department Representative Signature** STATE OF NEBRASKA)ss. County of Lancaster Before me, a notary public qualified for said County, personally came me to be the identical persons who signed the foregoing Nuisance Abatement Authorization, and acknowledged the execution thereof to be a voluntary act and deed. WITNESS MY HAND AND NOTORIAL SEAL THIS 30DAY OF

GENERAL NOTARY - State of Nebraska
RONI R: OLANDER
My Comm. Exp. Aug. 30, 2009

NOTARY PUBLIC

Assessment Costs: \$ 141.55 (These costs are approximate and are subject to change.) This form shall serve as notification of a pending assessment against the property.



· · · · · · · · · · · · · · · · · · ·						
Authorization Number	09-35		~~ . Ai			
Location of Premises		Sub, Lot	<u> 336 N</u>	1 32 Nd	<u>Street</u>	
Legal Description	<u>Dyers</u>	<u> Sub, Loi</u>	- 8			
				•	•	
l, as Health Director, have found	I that:					
	it notice served said premises l	l in person o has failed to	r via certifie comply wit	ed mail on _	07/0Z /	Z009.
Therefore, by virtue of the auth refuse hauler to remove the off stated above.						
BH	Auce Nu ealth Director	ナ	·	7 / <u>/(</u> Dat) / 6 ^G	
By the authority granted in Nui Director of the Lincoln-Lancaste Department, representatives of of the conditions constituting a Licensed Refuse Hauler	sance Abateme r County Healt	h Departmer	ntion No(nt, and for a cleare	a fee of \$ <u>_L</u> d the premi	<u>(0 </u>	be paid by the
Name of Hauler Representa	tive (print) Signature	<u></u>	+ 24)	icek	V VO	-3/
Health Department Represe	ntative Signature	Hay	Her Her	, fe		
STATE OF NEBRASKA)					
County of Lancaster)ss.)			production of the state and approximately	The same of the sa	
Before me, a notary pu me to be the identical persons execution thereof to be a volun	who signed the	e foregoing I			SILLER uthorization,	, and acknowledged th
WITNESS MY HAND AN	D NOTORIAL SI	EAL THIS	DA DA	Y OF		, 200%

Assessment Costs: \$156.95 (These costs are approximate and are subject to change.) This form shall serve as notification of a pending assessment against the property.

GENERAL NOTARY - State of Nebraska RONI R. OLANDER My Comm. Exp. Aug. 30, 2009

NOTARY PUBLIC



Authorizat	ion Numbe	ľ
Location o	f Premises	
Legal Desc	ription	

830 N. 25+5 Street
Easterday Bros Replat (of Lots 1-12 Easterday Addition), Lot H

	~			
, as Health Director, have found	that:			
 ☑ The owner (or his/her author (5) day nuisance abatement ☑ The tenant or occupant of served in person or via cert 	t notice served in posaid premises has fa	erson or via certif ailed to comply w	ied mail on <u>7 / 6 / 6</u>	<u> </u>
Therefore, by virtue of the authorefuse hauler to remove the offestated above.	ority vested in me b ensive substances co	y Lincoln Municip onstituting a decl	al Code Chapter 8.26.030 red public nuisance exist	, I hereby authorize a ing on the premises
Bu	ealth Director		7//3/09 Date	
By the authority granted in Nuis Director of the Lincoln-Lancaster Department, representatives of of the conditions constituting a	r County Health Dep	partment, and foi	a fee of \$ <u>2 0 0</u> to I ed the premises at <u> 名</u> ま	oe paid by the
Licensed Refuse Hauler	Parkyon S.	arithin	<i>-</i>	
Name of Hauler Representat	tive (print) Signature	Steve Long	HATTEN	
Health Department Represe	ntative Signature	Hay Hea	fr.	
STATE OF NEBRASKA))ss.			William Carlo Carl
County of Lancaster)			<u> </u>
Before me, a notary pub me to be the identical persons v execution thereof to be a volunt	who signed the fore	d County, person egoing Nuisance A	ally came <u>Till (10 1</u> 1).batement Authorization,	, known to and acknowledged the
WITNESS MY HAND AND	O NOTORIAL SEAL T	HIS <u>13</u> D	AY OF Tuly	
	DTARY - State of Nebraska DNI R. OLANDER omm. Exp. Aug. 30, 2009		NOTARY P	<u>Jonalen</u> UBLIC

serve as notification of a pending assessment against the property.

Assessment Costs:

\$ 318.95 (These costs are approximate and are subject to change.) This form shall



Authorization Number Location of Premises	09-38	* * * * * * * * * * * * * * * * * * *	2525	Clevelad	- Enpty lot	Lots 29-37 Lots 29-37 Nortside
Legal Description	Carroll	M5 ACC	ution_			
·	•					·
I, as Health Director, have four	nd that:					
☐ The owner (or his/her aut (5) day nuisance abateme ☐ The tenant or occupant o served in person or via ce	ent notice served f said premises	d in person o has failed to	or via certifie comply wit	ed mail on 💪	7107 1 70	4
Therefore, by virtue of the aut refuse hauler to remove the of stated above.						
B	NU AS Health Director	pr.		1 //3 Date	109	
By the authority granted in Nu Director of the Lincoln-Lancast Department, representatives of of the conditions constituting Licensed Refuse Hauler Name of Hauler Represent Health Department Represent	ter County Healt If Paraga Sa a public nuisan Araga ative (print) Signature	th Departme	nt, and for a cleared // / 2009	a fee of \$ <u>/</u> d the premise	<i>50.</i> − to be	paid by the
STATE OF NEBRASKA County of Lancaster Before me, a notary p))ss.) ublic qualified fo	or said Coun	ty, personal	ly came <u></u>	Sauce D	<u>}</u> , known to

WITNESS MY HAND AND NOTORIAL SEAL THIS 13 DAY OF 1000 , 09

GENERAL NOTARY - State of Nebraska RONI R. OLANDER My Comm. Exp. Aug. 30, 2009

NOTARY PUBLIC

Assessment Costs: \$ 21895 (These costs are approximate and are subject to change.) This form shall serve as notification of a pending assessment against the property.



Authorization Number Location of Premises Legal Description

og - 160				
726	2	315+		
Park Vieu	Add.	Block I.	Lo+ 17	

I, as Health Director, have found that:
The owner (or his/her authorized agent) of the premises stated above has failed to comply with a five (5) day nuisance abatement notice served in person or via certified mail on 6 / 10 / 09. The tenant or occupant of said premises has failed to comply with a five (5) day nuisance abatement notice served in person or via certified mail on/
Therefore, by virtue of the authority vested in me by Lincoln Municipal Code Chapter 8.26.030, I hereby authorize a refuse hauler to remove the offensive substances constituting a declared public nuisance existing on the premises stated above.
Health Director Date
By the authority granted in Nuisance Abatement Authorization No. Da issued on 7 / 14 / 09 by the Director of the Lincoln-Lancaster County Health Department, and for a fee of \$ to be paid by the Department, representatives of Paragram Suntation cleared the premises at 97 6 93 of the conditions constituting a public nuisance on 07 / 14 / 09 by the Department, representatives of the conditions constituting a public nuisance on 07 / 14 / 09 by the Department, representative (print) Signature Name of Hauler Representative (print) Signature Health Department Representative Signature Ames & Ame
STATE OF NEBRASKA))ss. County of Lancaster)
Before me, a notary public qualified for said County, personally came
WITNESS MY HAND AND NOTORIAL SEAL THIS 14 DAY OF July , 2009
GENERAL NOTARY - State of Nebraska RONI R. OLANDER My Comm. Exp. Aug. 30, 2009 NOTARY PUBLIC
Assessment Costs: \$ 100 76 (These costs are approximate and are subject to change) This form shall

White - Health Department

serve as notification of a pending assessment against the property.

Pink - City Clerk



Autho	rizati	ion N	lumb	eı
Locati	on o	f Pre	mises	ŝ
Legal	Desc	riptio	on	

09-42	~)				
S40 N 282	<u> 7€</u>				
Houtz + Bald	Wins	Swh	1/0+	1012	NUSU
19-00-7) B10	cK 4	Lot	5	-

Legal Description	19-10-7) E	ns Sub(of lu/2 NL 310cK 4 Lot5	<u>มรเม</u>
I, as Health Director, have found that	:	_	
(5) day nuisance abatement not	cice served in person or via cert premises has failed to comply v	l above has failed to comply with a five ified mail on <u>7 /25/209</u> with a five (5) day nuisance abatement	
Therefore, by virtue of the authority refuse hauler to remove the offensive stated above.	vested in me by Lincoln Munici e substances constituting a dec	ipal Code Chapter 8.26.030, I hereby a clared public nuisance existing on the p	uthorize a remises
Buo Health	Director	\(\psi_1 \frac{\psi_1 \psi_1 \frac{\psi_1 \psi_1 \frac{\psi_1 \p	
Director of the Lincoln-Lancaster Cor Department, representatives of $\frac{\hat{V}_{C}}{\hat{V}_{C}}$ of the conditions constituting a pub	unty Health Department, and for San (1971) clear clear lic nuisance on 08 / 05 / 05		he .
Name of Hauler Representative	Varación Sanitati (print) XVX Sco nature	the Zinjeck fat	3
Health Department Representat Sign	ive Ames Enature	BARO REHS	
STATE OF NEBRASKA))ss.			
County of Lancaster)		as a second to the second seco	
Before me, a notary public of me to be the identical persons who execution thereof to be a voluntary		nally came <u>TXUCCL</u> (CV) Abatement Authorization, and acknow	_, known to vledged the
WITNESS MY HAND AND NO	OTORIAL SEAL THIS 4	DAY OF TOUR	2009
RC RC	OTARY - State of Nebraska NI R. OLANDER mm. Exp. Aug. 30, 2013	NOTARY PUBLIC	

Assessment Costs: \$ 188.15 (These costs are approximate and are subject to change.) This form shall serve as notification of a pending assessment against the property.



Authorization Number Location of Premises Legal Description 107-13
I, as Health Director, have found that:
, as Health Director, have found that:
The owner (or his/her authorized agent) of the premises stated above has failed to comply with a five (5) day nuisance abatement notice served in person or via certified mail on <u>07/29/2009</u> The tenant or occupant of said premises has failed to comply with a five (5) day nuisance abatement notice served in person or via certified mail on/
Therefore, by virtue of the authority vested in me by Lincoln Municipal Code Chapter 8.26.030, I hereby authorize a refuse hauler to remove the offensive substances constituting a declared public nuisance existing on the premises stated above.
Bus Nat R 15 109 Health Director Date
By the authority granted in Nuisance Abatement Authorization No. <u>09-13</u> issued on <u>08/05/09</u> by the Director of the Lincoln-Lancaster County Health Department, and for a fee of \$_150000 to be paid by the Department, representatives of <u>Paragon</u> Sanitation cleared the premises at <u>2327</u> 0 Street
of the conditions constituting a public nuisance on <u>88/06/09</u> .
Name of Hauler Representative (print) Scott Zancek
Name of Hauler Representative (print) Signature
Health Department Representative Signature Having House Havin
STATE OF NEBRASKA))ss.
County of Lancaster)
Before me, a notary public qualified for said County, personally came Thurs have to be the identical persons who signed the foregoing Nuisance Abatement Authorization, and acknowledged the execution thereof to be a voluntary act and deed.
WITNESS MY HAND AND NOTORIAL SEAL THIS 5 DAY OF HUGUST, 2005
GENERAL NOTARY - State of Nebraska RONI R. OLANDER My Comm. Exp. Aug. 30, 2013 NOTARY PUBLIC
Assessment Costs: \$ 216.55 (These costs are approximate and are subject to change.) This form shall serve as notification of a pending assessment against the property.

White - Health Department

Pink - City Clerk



Auth	oriz	atio	n I	Vun	bei
Locat	tion	of	Pre	mis	es
Legal	De	scri	pti	on	

09-44		.1				
6927	1-101 U	oreth				
Bethanu	Heights.	BIOCK 52,	LOT 4	81	EIO'	LOIS

I, as Health Director, have found that:
The owner (or his/her authorized agent) of the premises stated above has failed to comply with a five (5) day nuisance abatement notice served in person or via certified mail on
Therefore, by virtue of the authority vested in me by Lincoln Municipal Code Chapter 8.26.030, I hereby authorize a refuse hauler to remove the offensive substances constituting a declared public nuisance existing on the premises stated above.
$\frac{Buu}{\text{Health Director}} \frac{P_{1/3,09}}{\text{Date}}$
By the authority granted in Nuisance Abatement Authorization No. 01-44 issued on 8/13/09 by the Director of the Lincoln-Lancaster County Health Department, and for a fee of \$ 35 to be paid by the Department, representatives of Variable Authorization cleared the premises at 6927 Ayres world of the conditions constituting a public nulsance on 69/13/04.
Name of Hauler Representative (print) Signature
Health Department Representative Signature James Bane REAS Assertion
STATE OF NEBRASKA))ss.
Before me, a notary public qualified for said County, personally came The County of Lancaster The Manager of the identical persons who signed the foregoing Nuisance Abatement Authorization, and acknowledged the execution thereof to be a voluntary act and deed. WITNESS MY HAND AND NOTORIAL SEAL THIS DAY OF The County of Lancaster The Manager of Lancaster The Manager of Lancaster The Lancaste
GENERAL NOTARY - State of Nebraska RONI R. OLANDER My Comm. Exp. Aug. 30, 2013 NOTARY PUBLIC
Assessment Costs: \$ 153.05 (These costs are approximate and are subject to change.) This form shall serve as notification of a pending assessment against the property.



Autho	riza	tion	Numi	ber
Locat	ion (of Pr	emise	es.
Legal	Des	cript	ion	

09-45		
3414 N	7 7 2	
Sunnuside	ACH, Block 4, LOHIS, EX WIS'	

Legal Description Oxford State Party District Party
I, as Health Director, have found that:
The owner (or his/her authorized agent) of the premises stated above has failed to comply with a five (5) day nuisance abatement notice served in person or via certified mail on/
Therefore, by virtue of the authority vested in me by Lincoln Municipal Code Chapter 8.26.030, I hereby authorize a refuse hauler to remove the offensive substances constituting a declared public nuisance existing on the premises stated above.
Health Director Date
By the authority granted in Nuisance Abatement Authorization No. $09-45$ issued on $8/13/09$ by the Director of the Lincoln-Lancaster County Health Department, and for a fee of $8/80$ to be paid by the Department, representatives of $18/60$ cleared the premises at $18/60$ of the conditions constituting a public nuisance on $8/15/6$.
Licensed Refuse Hauler (ARAGON SAN ITATION INC.
Name of Hauler Representative (print) Signature Sieve HATTEN Ature Hatter
Health Department Representative Signature JAMES BARE REHS JAMES BARE REHS
STATE OF NEBRASKA))ss.
County of Lancaster)
Before me, a notary public qualified for said County, personally came \(\frac{\frac{1}{2} \text{Nill} \text{County}}{\text{total}}\), known to me to be the identical persons who signed the foregoing Nuisance Abatement Authorization, and acknowledged the execution thereof to be a voluntary act and deed.
WITNESS MY HAND AND NOTORIAL SEAL THIS 13th DAY OF themet, 2009
GENERAL NOTARY - State of Nebraska RONI R. OLANDER My Comm. Exp. Aug. 30, 2013 NOTARY PUBLIC
the second secon

Assessment Costs: \$_216.15 (These costs are approximate and are subject to change.) This form shall serve as notification of a pending assessment against the property.